U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 950 2	2. Fiscal Year Covered From:		
	1 / 1 / 2004 Through: 12 / 31 / 2004		
3. Name and address of person filing.	Name, file number, and address of labor organization.		
Name Carl Goff	Name Operating Engineers Local Union No. 3		
	Labor Organization File Number 035-651		
P.O. Box, Bldg., Room No., if any P.O. Box 624	P.O. Box, Building and Room Number, if any		
Street Street	Street 1620 South Loop Road		
City Half Moon Bay	City Alameda		
State California ZIP Code + 4 94019	State California ZIP Code + 4 94502		
5. Position in labor organization (pane) เมื่อเลือน (การการการการการการการการการการการการการก	36 - 3 - 15 ; 93) Gent o telephologica a annua a government (S. 8 va f. 1900 p. 1900) 36, act o speciment (S. 1900 p. 1900)		
C. Salve	9.5.		
Enter appropriate data below if, during the past fiscal year, you or your spot (except as specified in the exclusion of the past fiscal year).	use or minor child directly or indirectly had any of the following interests sions set forth in the instructions):		
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.			
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.		
Name Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
being spare manus an analysis and a superior and a spare a spa	7.b. Amount.		
Street			
City (1) (2) (2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4			
State ZIP Code ÷ 4	grand and the second		
Signature			
15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany undersigned's knowledge and belief, true, correct, and complete. (See the sec	ing documents), has been examined by the signatory and is, to the best of the		
Signed Signed	On 9/1/05 650-712-0760 Telephone Number		

Name of Person Filing Carl Goff	File Number U-		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.			
8. Name and address of Business (including trade name, if any). Name Operating Engineers Pension Trust Fund Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 1640 South Loop Road City Alameda State California ZIF Code +4 94502	9. Business deals with: a. Labor Organization b. Trust c. Employer		
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	11.a. Nature of such dealing. Local Union's pension trust fund. 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. Meeting expense for IF Institute for Investment and IFEBP Conference.		
Samples Engineery plantable () pelaphosphatam-mass (mass or or more principles and mass or	TERRET CONTEST CONTEST OF THE PROPERTY OF THE		
	12.b. Amount. \$2,917		
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	r parts A and B above)		
or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name	r parts A and B above)		
or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	r parts A and B above) or other thing of value.		

	File Number U-
Name of Person Filing Carl Goff	1 110 1 1211 12

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (include	ding trade name, i	if any).	9. Business deals with:	
Name Associated Third Party	Administrat	ion	a. Labor Organization	
Trade Name, if any:			b. Trust	
P.O. Box, Bldg., Room No., if any		And the state of t	(52)	
Street 1640 South Loop Road	Street 1640 South Loop Road		c. Employer	
City Alameda	er generale en			
State California	ZIP Code + 4	94502		
10. If 9.b. or 9.c. is checked give trust or em	ployer's name.		11.a. Nature of such dealing.	
Name Operating Engineers Trust Funds		ATPA provides administration services to the Local Union's related pension and health and welfare		
Trade Name, if any:		one of a manuscript of the characteristic and a second of a contract of a contract of the characteristic and a contracteristic and	trust funds.	
P.O. Box, Bldg., Room No., if any				
Street 1640 South Loop Road	er gerind geneda ander er sener er verde mid dy e geneda an ha sener de dy'e belger.	manations of a second less things to quantum advances of the correct		
City Alameda			The state of the s	
State California	ZIP Code + 4	94502	11.b. Approximate dollar value of such dealing.	
			12.a. Nature of interest held or income received.	
			Lunches, dinners, beverages and other events hosted by ATPA.	
1				
			12.b. Amount. \$3.	

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8. Name and address of Business (including trade name, if any). Name McMorgan & Company Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 1 Bush Street, Suite 800 City San Francisco State California ZIP Code + 4 94104	9. Business deals with: a. Labor Organization b. Trust c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing. Investment manager.	
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	as the second second to the second
	12.a. Nature of interest held or income received.	
	Lunches, dinners and other events McMorgan & Co.	hosted by
	12.b. Amount.	\$725

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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Alliance for Bernstein	a. Labor Organization	
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 555 California Street, Suite 4600	c. Employer	
City San Francisco		
State California ZIP Code + 4 94104		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Investments.	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City		
State	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	managasananananananananan dagal managa, adal dinah lakan laya makanana, kayakan makan langa zara kana di
	Meeting with Jeff Greendorfer.	
		The second secon
		100
	1 Company of the Comp	
	12.b. Amount.	\$200

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